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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF GEORGIA		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

02/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	Part 1: Identify Yourself						
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):			
1.	Your full name						
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	First name Flinn Middle name Miller Last name and Suffix (Sr., Jr., II, III)	-	First name Middle name Last name and Suffix (Sr., Jr., II, III)			
2.	All other names you have used in the last 8 years Include your married or maiden names.	Laurie Miller Laurie F Miller					
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3497					

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4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
		■ I have not used any business name or EINs. Business name(s) EIN	☐ I have not used any business name or EINs. Business name(s) EIN			
5. Where you live		3389 Peachtree Corners Apt P	If Debtor 2 lives at a different address:			
		Norcross, GA 30092 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Gwinnett	rtanison, ottoot, otty, ottato a 211 oodo			
		County	County			
above, fill it in here. Note that the court will so notices to you at this mailing address.		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
3.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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•	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choosing to file under	■ Chap	ter 7				
		☐ Chap	ter 11				
		☐ Chap	ter 12				
		☐ Chap	oter 13				
•	How you will pay the fee	ab ord	out how y	ou may pay. Typica rattorney is submit	ally, if you are paying the fee yo	k with the clerk's office in your local court for more details urself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with	
		on, sign and attach the Application for Individuals to Pay					
		☐ Ire	equest th	at my fee be waiv	Official Form 103A). ed (You may request this optior	n only if you are filing for Chapter 7. By law, a judge may,	
		ар	plies to yo	ur family size and	you are unable to pay the fee ir	ur income is less than 150% of the official poverty line than installments). If you choose this option, you must fill out italized and file it with your petition.	
	Have you filed for bankruptcy within the	■ No.					
	last 8 years?	☐ Yes.					
			District		When	Case number	
			District		When	Case number	
			District		When	Case number	
).	Are any bankruptcy cases pending or being	■ No					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
1.	Do you rent your residence?	□ No.	Go to	line 12.			
	residence:	■ Yes.	Has y	our landlord obtain	ed an eviction judgment agains	t you?	
				No. Go to line 12	<u>.</u>		

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ar	t 3: Report About Any Bu	sinesses	You Own	as a Sole Proprieto	or	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	and location of busin	ness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, State	e & ZIP Code	
	it to this petition.		Check	the appropriate box	to describe your business:	
				Health Care Busine	ess (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real E	Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as def	fined in 11 U.S.C. § 101(53A))	
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))	
				None of the above		
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?		deadlines	s. If you in s, cash-flo	dicate that you are a ow statement, and fed	ourt must know whether you are a small business debtor so that it can set appropriate small business debtor, you must attach your most recent balance sheet, statement o deral income tax return or if any of these documents do not exist, follow the procedure	f
	For a definition of <i>small</i>	■ No.	I am n	ot filing under Chapte	er 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	ling under Chapter 1	1, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.			1, I am a small business debtor according to the definition in the Bankruptcy Code, are under Subchapter V of Chapter 11.	nd
		☐ Yes.			1, I am a small business debtor according to the definition in the Bankruptcy Code, ar Subchapter V of Chapter 11.	nd
ar	t 4: Report if You Own or	Have Any	Hazardo	us Property or Any	Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is t	he hazard?		
	public health or safety?					
	Or do you own any property that needs immediate attention?			iate attention is why is it needed?		
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where is	the property?		
					Number, Street, City, State & Zip Code	

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Debtor 1 Laurie Flinn Miller Case number (if known)

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 22-53824-pwb Doc 1 Filed 05/19/22 Entered 05/19/22 08:29:54 **Desc Main** Page 6 of 52 Document

Laurie Flinn Miller Case number (if known) Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 1-49 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **□** \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion ■ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion \$0 - \$50,000 estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **□** \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **□** \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Laurie Flinn Miller /s/ Laurie Flinn Miller Laurie Flinn Miller Signature of Debtor 2 Signature of Debtor 1 Executed on May 18, 2022 Executed on MM / DD / YYYY MM / DD / YYYY

Debtor 1

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Debtor 1 Laurie Flinn Miller Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Danielle J. Eliot	Date	May 18, 2022
Signature of Attorney for Debtor		MM / DD / YYYY
Danielle J. Eliot Printed name		
The Law Office of Danielle J. Eliot, P.C.		
Firm name		
2470 Windy Hill Rd.		
SUITE 151		
Marietta, GA 30067		
Number, Street, City, State & ZIP Code		
Contact phone 770-672-6735	Email address	danielle@djelawfirm.com
142243 GA		
Bar number & State		

ΞIII	in this inform	ation to identify you	r case:			
	btor 1	Laurie Flinn Mill				
	bioi i	First Name	Middle Name	Last Name		
	btor 2 ouse if, filing)	First Name	Middle Name	Last Name		
'						
UII	iteu States Dar	kruptcy Court for the:	NORTHERN DISTRICT	DF GEORGIA		
	se number nown)				_	Check if this is an amended filing
Of	ficial For	m 107				
St	atement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	04/22
info nun	ormation. If mender (if known	ore space is needed,). Answer every que	attach a separate sheet to	this form. On the top of an	equally responsible for sup y additional pages, write yo	plying correct ur name and case
1.	What is your	current marital statu	us?			
	☐ Married ■ Not marr	ried				
2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. List	: all of the places you l	lived in the last 3 years. Do n	ot include where you live now	<i>ı</i> .	
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2 Prior Ac	ldress:	Dates Debtor 2 lived there
3. stat					ity property state or territor ico, Texas, Washington and V	
	■ No □ Yes. Ma	ke sure you fill out <i>Scl</i>	hedule H: Your Codebtors (O	fficial Form 106H).		
Pai	rt 2 Explain	n the Sources of You	ır Income			
4.	Fill in the tota	I amount of income yo	mployment or from operating used in the contract of the contra	all businesses, including part		ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$11,539.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

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Debtor 1 Laurie Flinn Miller Case number (if known) **Debtor 1** Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$32,000.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2021) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$20,000.00 Wages, commissions, ☐ Wages, commissions, (January 1 to December 31, 2020) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$7,575* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address

Total amount paid

Dates of payment

Amount you

still owe

Was this payment for ...

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7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.						
	☐ Yes. List all payments to an insider.						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment	
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos No Yes. List all payments to an insider		ments or transfer a	any property on a	ccount of a de	ebt that benefited an	
	Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for	this payment	
			paid	still owe	Include cred		
Pai	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures					
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.						
	Case title	Nature of the case	Court or agency		Status of th	e case	
	Case number						
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		erty repossessed, f	foreclosed, garnis	hed, attached	l, seized, or levied?	
	Creditor Name and Address	Describe the Property		Date		Value of the	
		Explain what happened	d			property	
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment becomes No ☐ Yes. Fill in the details.		luding a bank or fi	nancial institution	, set off any a	mounts from your	
	Creditor Name and Address	Describe the action the	creditor took	Date taken	action was	Amount	
	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a No Yes List Certain Gifts and Contributions		erty in the possess			fit of creditors, a	
13.	Within 2 years before you filed for bankrup No	tcy, did you give any gift	s with a total value	of more than \$60	0 per person?	,	
	☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the g	s you gave ifts	Value	
	Person to Whom You Gave the Gift and Address:						

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		L	ocument	Page 11 of 52			
Deb	tor 1 Laurie Flinn Miller			Case	e number (i	f known)	
14.	Within 2 years before you filed for bank ■ No			gifts or contributions w	vith a total	value of more than	\$600 to any charity
	Yes. Fill in the details for each gift or	contribution	on.				
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo		Describe what	you contributed		Dates you contributed	Valu
Part	6: List Certain Losses						
	Within 1 year before you filed for bankroor gambling?	uptcy or	since you filed fo	or bankruptcy, did you	lose anyth	ning because of the	t, fire, other disaste
	■ No □ Yes. Fill in the details.						
	Describe the property you lost and	Describ	oe anv insurance	coverage for the loss		Date of your	Value of propert
	how the loss occurred	Include	the amount that i	nsurance has paid. List p 33 of <i>Schedule A/B: Pro</i>	pending	loss	los
Part	7: List Certain Payments or Transfer	rs					
	Within 1 year before you filed for bankruconsulted about seeking bankruptcy or Include any attorneys, bankruptcy petition No Yes. Fill in the details. Person Who Was Paid	preparin	g a bankruptcy , or credit counse Description an	petition?	es required	in your bankruptcy. Date payment	Amount o
	Address Email or website address Person Who Made the Payment, if Not	You	transferred			or transfer was made	paymen
	moneysharp credit counseling		10.00 credit c	ounseling		5/13/2022	\$10.00
	The Law Office of Danielle J. Eliot, 2470 Windy Hill Rd. SUITE 151 Marietta, GA 30067 danielle@djelawfirm.com	, P.C	78 pertial filir 45 credit repo 27 partial atto	ort		5/13/2022	\$150.00
	Within 1 year before you filed for bankro promised to help you deal with your cre Do not include any payment or transfer tha	editors or	to make payme		half pay oı	r transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.						
	Person Who Was Paid Address		Description an transferred	d value of any property	′	Date payment or transfer was made	Amount o paymen
,	Within 2 years before you filed for bank transferred in the ordinary course of yo Include both outright transfers and transfer include gifts and transfers that you have al	our busine rs made a	ess or financial a s security (such a	affairs? as the granting of a secu			

☐ Yes. Fill in the details.

Person Who Received Transfer Address

Person's relationship to you

Description and value of property transferred

Describe any property or payments received or debts paid in exchange

Date transfer was made

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 4 Case 22-53824-pwb Doc 1 Filed 05/19/22 Entered 05/19/22 08:29:54 Desc Main Document Page 12 of 52

Debtor 1 Laurie Flinn Miller Case number (if known)

	beneficiary? (These are often called asset-pro ■ No □ Yes. Fill in the details.	otection devices.)			
	Name of trust	Description and	value of the pro	perty transferred	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, In:	struments, Safe Depos	t Boxes, and St	orage Units	
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, asso ■ No □ Yes. Fill in the details.	or other financial accou	nts; certificates	of deposit; shares in banks, cred	•
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accou	unt or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 cash, or other valuables? No Yes. Fill in the details.	year before you filed fo	r bankruptcy, ar	ny safe deposit box or other depo	sitory for securities,
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe the contents	Do you still have it?
22.	Have you stored property in a storage unit o ■ No □ Yes. Fill in the details.	or place other than you	r home within 1	year before you filed for bankrup	tcy?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe the contents	Do you still have it?
Par	19: Identify Property You Hold or Control	for Someone Else			
23.	Do you hold or control any property that so for someone. ■ No □ Yes. Fill in the details.	meone else owns? Incl	ude any propert	ty you borrowed from, are storing	for, or hold in trust
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe the property	Value

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Laurie Flinn Miller

Case number (if known)

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?								
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, know it	if you Date of notice				
25.	Have you notified any governmental unit of a	ny release of hazardous material?						
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, know it	if you Date of notice				
26.	Have you been a party in any judicial or adm	inistrative proceeding under any envi	ronmental law? Include	settlements and orders.				
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Par	11: Give Details About Your Business or C	connections to Any Business						
27.	Within 4 years before you filed for bankruptc	y, did you own a business or have ar	y of the following conne	ctions to any business?				
	☐ A sole proprietor or self-employed in	a trade, profession, or other activity,	either full-time or part-ti	me				
	☐ A member of a limited liability compa	ny (LLC) or limited liability partnersh	ip (LLP)					
	☐ A partner in a partnership							
	☐ An officer, director, or managing exe	cutive of a corporation						
	☐ An owner of at least 5% of the voting	or equity securities of a corporation						
	■ No. None of the above applies. Go to Pa	art 12.						
	☐ Yes. Check all that apply above and fill i	n the details below for each business	i.					
		Describe the nature of the business	Employer Identific					
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business ex	cial Security number or ITIN. isted				
28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.							
	■ No							
	Yes. Fill in the details below.							
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued						

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Case number (if known) Debtor 1 Laurie Flinn Miller Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Laurie Flinn Miller Laurie Flinn Miller Laurie Flinn Miller Signature of Debtor 2 Signature of Debtor 1 Date May 18, 2022 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inforn	nation to identify you	ır case an	nd this filing:			
Debtor 1	Laurie Flinn Mil	ler				
	First Name		Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	N	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	NORTH	HERN DISTRICT C	OF GEORGIA		
	······································					_
Case number _						☐ Check if this is an amended filing
Official Fo	rm 106A/B					
Schedul	e A/B: Pro	perty	1			12/15
Answer every ques	tion.	·		n. On the top of any additional pag	ges, write your name and ca	se number (if known).
1. Do you own or h	nave any legal or equital	ole interest	t in any residence, b	ouilding, land, or similar property?		
■ No. Go to Par	t 2.					
☐ Yes. Where is	s the property?					
Part 2: Describe	Your Vehicles					
someone else driv		cle, also r	eport it on <i>Schedu</i>	icles, whether they are registon le G: Executory Contracts and U s		vehicles you own that
	Nissan				Do not deduct secured	claims or exemptions. Put
o.i manoi	Pickup		_	est in the property? Check one	the amount of any secu	red claims on Schedule D: aims Secured by Property.
	1994		■ Debtor 1 only □ Debtor 2 only			Current value of the
Approximat	e mileage: 13	0,000	Debtor 1 and D	ebtor 2 only	entire property?	portion you own?
Other inform	nation:		☐ At least one of t	the debtors and another		
			Check if this is (see instructions)	s community property	\$4,775.00	\$4,775.00
		<u>'</u>				
				al vehicles, other vehicles, an		
Examples: Boa	ts, trailers, motors, per	sonal wat	ercraft, fishing vess	sels, snowmobiles, motorcycle a	accessories	
■ No						
☐ Yes						
	•	-	•	ntries from Part 2, including ar	-	\$4,775.00
	Your Personal and Hou			fallowing items?		Current value of the

Official Form 106A/B Schedule A/B: Property page 1

portion you own?
Do not deduct secured

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Case number (if known)

6.	Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware	claims or exemptions.
	□ No ■ Yes. Describe	
	Household Furnishings	\$1,000.00
7.	 Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music consideration including cell phones, cameras, media players, games □ No ■ Yes. Describe 	ollections; electronic devices
	Household Electronics	\$1,000.00
3.	Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, other collections, memorabilia, collectibles ■ No □ Yes. Describe	or baseball card collections;
).	Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes a musical instruments ■ No □ Yes. Describe	and kayaks; carpentry tools;
10.	 Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No □ Yes. Describe 	
11.	 Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No ■ Yes. Describe 	
	Clothing and shoes	\$500.00
13.	 Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, g No Yes. Describe Non-farm animals Examples: Dogs, cats, birds, horses No Yes. Describe 	old, silver
14.	. Any other personal and household items you did not already list, including any health aids you did not list ■ No ■ You Give specific information	
	☐ Yes. Give specific information	
15	5. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	\$2,500.00
Pa	art 4: Describe Your Financial Assets	

Do you own or have any legal or equitable interest in any of the following?

Debtor 1

Laurie Flinn Miller

Official Form 106A/B Schedule A/B: Property

Current value of the

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De	ebtor 1	Laurie Flinn Miller			Case number <i>(if known)</i>	
					Do	rtion you own? not deduct secured ims or exemptions.
16.	■ No	oles: Money you have in	, , <u>,</u>	ome, in a safe deposit box, and on hand w	hen you file your petition	
17.	Examp —			ounts; certificates of deposit; shares in cress with the same institution, list each.	edit unions, brokerage houses, a	and other similar
	□ No ■ Yes			Institution name:		
		17.1.	Checking	Bank of America		\$132.00
18.	Examp ■ No	·	nent accounts with bro	okerage firms, money market accounts		
	☐ Yes		Institution or issuer	name:		
19.	Non-pu joint ve ■ No		l interests in incorp	orated and unincorporated businesses	, including an interest in an L	LC, partnership, and
		Give specific information	n about themame of entity:		% of ownership:	
20.	Negotia	<i>able instrument</i> s include	personal checks, cas	otiable and non-negotiable instruments shiers' checks, promissory notes, and moransfer to someone by signing or delivering	ney orders.	
	■ No □ Yes. 0	Give specific information Is:	about them			
		nent or pension accour bles: Interests in IRA, ER		103(b), thrift savings accounts, or other pe	ension or profit-sharing plans	
	Yes. I	List each account separa Type	ately. of account:	Institution name:		
				401k		\$111.00
22.	Your st Examp		its you have made so	o that you may continue service or use fro public utilities (electric, gas, water), telect		thers
	■ No □ Yes			Institution name or individual:		
23.	Annuiti	ies (A contract for a peri	odic payment of mone	ey to you, either for life or for a number of	years)	
	■ No					
	☐ Yes		ne and description.			
24.		s in an education IRA, C. §§ 530(b)(1), 529A(b)		ualified ABLE program, or under a qua	lified state tuition program.	
	☐ Yes	Institution	name and description	n. Separately file the records of any intere	ests.11 U.S.C. § 521(c):	
25.	Trusts, ■ No	equitable or future into	erests in property (c	other than anything listed in line 1), and	l rights or powers exercisable	for your benefit
		Give specific information	n about them			

Case 22-53824-pwb Doc 1 Filed 05/19/22 Entered 05/19/22 08:29:54 Page 18 of 52 Document Debtor 1 Laurie Flinn Miller Case number (if known) 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ■ No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

■ No

☐ Yes. Describe each claim.......

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

No

☐ Yes. Describe each claim.......

35. Any financial assets you did not already list

■ No

☐ Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here......

\$243.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

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Debt	or 1 Laurie Flinn Miller		Case number (if known)	
37. D o	o you own or have any legal or equitable interest in any business	-related property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
Part 6	Describe Any Farm- and Commercial Fishing-Related Propert If you own or have an interest in farmland, list it in Part 1.	y You Own or Have an Inter	est In.	
46. D	o you own or have any legal or equitable interest in any t	farm- or commercial fish	ing-related property?	
I	No. Go to Part 7.			
[☐ Yes. Go to line 47.			
Part 7	Describe All Property You Own or Have an Interest in Th	at You Did Not List Above		
=	Do you have other property of any kind you did not alread Examples: Season tickets, country club membership No I Yes. Give specific information	y list?		
54.	Add the dollar value of all of your entries from Part 7. Wr	ite that number here		\$0.00
Part 8	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$4,775.00		
57.	Part 3: Total personal and household items, line 15	\$2,500.00	_	
58.	Part 4: Total financial assets, line 36	\$243.00	-	
59.	Part 5: Total business-related property, line 45	\$0.00	_	
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+ \$0.00	-	
62.	Total personal property. Add lines 56 through 61	\$7,518.00	Copy personal property total	\$7,518.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62	2		\$7,518.00

Official Form 106A/B Schedule A/B: Property page 5

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Fill in this informa	ill in this information to identify your case:							
Debtor 1	Laurie Flinn Mille	r						
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF GEORGIA					
Case number					☐ Check if this is an			
,					amended filing			

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

₽a	rt 1: Identify the Property You Claim as E	xempt					
1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you.						
	■ You are claiming state and federal nonban	kruptcy exemptions. 1	11 U.S	S.C. § 522(b)(3)			
	☐ You are claiming federal exemptions. 11 t	J.S.C. § 522(b)(2)					
2.	For any property you list on Schedule A/B	that you claim as exe	mpt,	fill in the information below.			
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption		
		Copy the value from Schedule A/B	Check only one box for each exemption.				
	1994 Nissan Pickup 130,000 miles Line from Schedule A/B: 3.1	\$4,775.00		\$4,775.00	O.C.G.A. § 44-13-100(a)(3)		
	Line from Scriedule AVB: 3.1		100% of fair market value, up to any applicable statutory limit				
	Household Furnishings Line from Schedule A/B: 6.1	\$1,000.00		\$1,000.00	O.C.G.A. § 44-13-100(a)(4)		
	Line nom <i>Schedule AVB</i> . 0.1			100% of fair market value, up to any applicable statutory limit			

Household Electronics

Line from Schedule A/B: 7.1

Clothing and shoes

Line from Schedule A/B: 11.1

\$1,000.00

\$500.00

O.C.G.A. § 44-13-100(a)(4)

O.C.G.A. § 44-13-100(a)(4)

\$1,000.00

\$500.00

100% of fair market value, up to any applicable statutory limit

100% of fair market value, up to

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Debtor 1	r1 <u>La</u>	aurie Flinn Miller		Case number (if known)			
		cription of the property and line on A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
			Copy the value from Check only one box for each exemption. Schedule A/B				
	01k	o Sahadula A/P: 21 1	\$111.00		\$111.00	O.C.G.A. § 44-13-100(a)(2.1)(D)	
LI	Line from <i>Schedule A/B</i> : 21.1			☐ 100% of fair market value, up to any applicable statutory limit		44-13-100(a)(2.1)(b)	
	-	claiming a homestead exemption to adjustment on 4/01/25 and every			led on or after the date of adjustme	nt.)	
	No						
] Yes	. Did you acquire the property cove	red by the exemption wi	ithin 1	,215 days before you filed this case	?	
		No					
		Yes					

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Fill in this infor	Fill in this information to identify your case:						
Debtor 1	Laurie Flinn Mille	r					
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF GEORGIA				
Case number (if known)					☐ Check if this is an amended filing		

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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Fill in this inform	nation to identify your ca				1	
		45e.			I	
Debtor 1	Laurie Flinn Miller First Name	Middle Name	Last Name			
Debtor 2	. not riame	madio Hamo	Editivanio			
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	inkruptcy Court for the:	NORTHERN DIS	STRICT OF GEORGIA			
Case number						
(if known)					☐ Check	if this is an
1					amend	led filing
Official Forn	n 106F/F					
	:/F: Creditors Wh	o Have Ur	secured Claims			12/15
Schedule D: Credit	tors Who Have Claims Secu ntinuation Page to this page	red by Property. If	I Form 106G). Do not include any omore space is needed, copy the P formation to report in a Part, do no	art you need, fill it out,	number the entries in	n the boxes on the
Part 1: List A	II of Your PRIORITY Uns	ecured Claims				
1. Do any credito	ors have priority unsecured	claims against yo	u?			
☐ No. Go to F	Part 2.					
Yes.						
identify what ty possible, list th	pe of claim it is. If a claim has	both priority and no according to the cre	ore than one priority unsecured claim onpriority amounts, list that claim here editor's name. If you have more than other creditors in Part 3.	and show both priority	and nonpriority amoun	ts. As much as
(For an explana	ation of each type of claim, se	e the instructions fo	r this form in the instruction booklet.			
				Total claim	Priority amount	Nonpriority amount
	a Department of Reve	nue Last 4	digits of account number	\$365.00		\$0.00
1800 Ce Ste 910	•	When	was the debt incurred?		_	
	, GA 30345 Street City State Zip Code	As of t	he date you file, the claim is: Chec	k all that apply		
	d the debt? Check one.	☐ Cor	· ·	it all triat apply		
■ Debtor 1 d	only		quidated			
Debtor 2 o	only	☐ Disp	outed			
☐ Debtor 1 a	and Debtor 2 only	Туре о	f PRIORITY unsecured claim:			
_	ne of the debtors and another	☐ Dor	nestic support obligations			
☐ Check if t	this claim is for a communi	ty debt Tax	es and certain other debts you owe t	he government		
	subject to offset?		ms for death or personal injury while			
No		☐ Oth	er. Specify			
☐ Yes			taxes			

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Debto	or 1 Laurie Flinn Miller	Case number (if known)					
2.2	Internal Revenue Service Priority Creditor's Name	Last 4 digits of account number	\$962.00	\$962.00	\$0.00		
	P.O. Box 7346 Philadelphia, PA 19101	When was the debt incurred?					
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that appl	у				
1	Who incurred the debt? Check one.	☐ Contingent					
I	Debtor 1 only	☐ Unliquidated					
- 1	Debtor 2 only	☐ Disputed					
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:					
	☐ At least one of the debtors and another	☐ Domestic support obligations					
	☐ Check if this claim is for a community debt	■ Taxes and certain other debts you owe the government	nt				
I	s the claim subject to offset?	☐ Claims for death or personal injury while you were into	oxicated				
ĺ	No	☐ Other_Specify					
	☐ Yes	Taxes					
Part 2	List All of Your NONPRIORITY Unsecu	red Claims					
3. D	o any creditors have nonpriority unsecured claim	s against you?					
	No. You have nothing to report in this part. Submit	his form to the court with your other schedules.					
	Yes.						
ur th	nsecured claim, list the creditor separately for each c	alphabetical order of the creditor who holds each claim aim. For each claim listed, identify what type of claim it is. D creditors in Part 3.If you have more than three nonpriority u	o not list claims alrea	ady included in Par	t 1. If more		
	····			Total clair	m		
4.1	Advanced Home Medical Equip	Last 4 digits of account number			\$459.74		
	Nonpriority Creditor's Name 2233 E Main St	When was the debt incurred?	_				
	Montrose, CO 81401	-					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that a	ppiy				
	Debtor 1 only	C continued					
	Debtor 2 only	☐ Contingent ☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
		Type of NONPRIORITY unsecured claim:					
	At least one of the debtors and another	☐ Student loans					
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement of	or divorce that you did	d not			
	Is the claim subject to offset?	report as priority claims	side you die				
	■ No	lacksquare Debts to pension or profit-sharing plans, and other	similar debts				
	☐ Yes	Other Specify Medical					

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1 Laurie Flinn Miller Case number (if known)

Debtor	1 Laurie Flinn Miller		Case number (if known)	
4.2	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number	4103	\$14,070.00
	Attn: Bankruptcy P.O. 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 06/07 Last Active 03/22	
•	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community	Student loans	a ciaiii.	
	debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.3	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number	7858	\$3,718.00
	Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 10/03 Last Active 03/22	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Un l iquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other Specify Credit Card		
4.4	FLEX FINANCE	Last 4 digits of account number	YS73	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy 246 5th Avenue 4th FI New York, NY 10001	When was the debt incurred?	Opened 11/24/21 Last Active 3/18/22	
-	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Un l iquidated		
	Debtor 1 and Debtor 2 only	Disputed	d alaim:	
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	a Glann.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	<u> </u>	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other Specify Check Cred	lit Or Line Of Credit	

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Debt	or 1 Laurie Flinn Miller		Case number (if known)	
4.5	Frost Arnett Company	Last 4 digits of account number		\$1,872.97
	Nonpriority Creditor's Name P.O. Box 198988 Nashville, TN 37219	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-shari	ng plans, and other similar debts	
	Yes	Other. Specify Medical		
4.6	Kohls/Capital One	Last 4 digits of account number	4657	\$3,301.00
	Nonpriority Creditor's Name Attn: Credit Administrator Po Box 3043 Milwaukee, WI 53201	When was the debt incurred?	Opened 06/07 Last Active 03/22	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	• ,		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepreport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-shari	ng plans, and other similar debts	
	Yes	Other. Specify Charge Ac	count	
4.7	Northland Group	Last 4 digits of account number		\$1,292.53
	Nonpriority Creditor's Name P.O. Box 390846	When was the debt incurred?		
	Minneapolis, MN 55439 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the slam	10. Official and apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sep	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-shari	ng plans, and other similar debts	
	☐ Yes	Other Specify Medical		

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Debt	or 1 Laurie Flinn Miller	Case number (if known)	
4.8	Patients Account Bureau	Last 4 digits of account number	\$1,377.00
	Nonpriority Creditor's Name P.O. Box 379 Norcross, GA 30091	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.9	Piedmont	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name PO Box 102859	When was the debt incurred?	
	Atlanta, GA 30368 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , ,,,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify notice	
4.1 0	Riverwoods Bahavioral Health	Last 4 digits of account number	\$1,872.97
	Nonpriority Creditor's Name 223 Medical Center Dr	When was the debt incurred?	
	Riverdale, GA 30274 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only		
		☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt	_	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	

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Debtor	1 Laurie Flinn Miller		Case number (if known)	
4.1	Synchrony Bank	Last 4 digits of account number	6290	\$1,346.00
	Nonpriority Creditor's Name		Opened 08/12 Last Active	
	Attn: Bankruptcy Po Box 965060	When was the debt incurred?	4/08/22	
	Orlando, FL 32896			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	Is the claim subject to offset?	<u></u>		
	■ No	☐ Debts to pension or profit-sharin		
	Yes	Other. Specify Charge Acc	count	
4.1	Synchrony Bank/JCPenney	Last 4 digits of account number	2387	\$0.00
	Nonpriority Creditor's Name	_		
	Attn: Bankruptcy		Opened 06/85 Last Active	
	Po Box 965060	When was the debt incurred?	03/15	
	Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	,		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Un l iquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Charge Acc	count	
Part 3:	List Others to Be Notified About a De	bt That You Already Listed		
is tryi have	nis page only if you have others to be notified a ing to collect from you for a debt you owe to so more than one creditor for any of the debts tha ed for any debts in Parts 1 or 2, do not fill out o	about your bankruptcy, for a debt that y omeone else, list the original creditor in it you listed in Parts 1 or 2, list the addi	Parts 1 or 2, then list the collection agency h	nere. Similarly, if you
		On which entry in Part 1 or Part 2 did you	_	
	e Card Services ox 15369	<u> </u>	Part 1: Creditors with Priority Unsecured Claim	
	ington, DE 19850	-	Part 2: Creditors with Nonpriority Unsecured C	aims
	o ,	Last 4 digits of account number		
		On which entry in Part 1 or Part 2 did you	list the original creditor?	
		 ' '	Part 1: Creditors with Priority Unsecured Claim	
	ox 15369 Ington, DE 19850		Part 2: Creditors with Nonpriority Unsecured C	aims
*********		Last 4 digits of account number		
Name a	and Address	On which entry in Part 1 or Part 2 did you	list the original creditor?	
		·	$oldsymbol{l}$ Part 1: Creditors with Priority Unsecured Claim	s
	th Avenue		Part 2: Creditors with Nonpriority Unsecured C	laims
New \	York, NY 10001	Last 4 digits of account number	· · ·	
		On which entry in Part 1 or Part 2 did you Line 4.6 of (<i>Check one</i>):	list the original creditor? ${f l}$ Part 1: Creditors with Priority Unsecured Claim	e
			a.t Otoattoto with i Holliy Ollocoulett Claill	

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Debtor 1 Laurie Flinn Miller		Case number (if known)				
Po Box 3115 Milwaukee, WI 53201		■ Part 2: Creditors with Nonpriority Unsecured Claims				
·	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part 2	2 did you list the original creditor?				
Synchrony Bank	Line 4.11 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims				
Po Box 965028 Orlando. FL 32896		■ Part 2: Creditors with Nonpriority Unsecured Claims				
Onando, FE 32090	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part 2	2 did you list the original creditor?				
Synchrony Bank/JCPenney	Line 4.12 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
Po Box 965007 Orlando, FL 32896		■ Part 2: Creditors with Nonpriority Unsecured Claims				
Offailuo, FL 32090	Last 4 digits of account number					

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 1,327.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 1,327.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 29,310.21
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 29,310.21

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Fill in this infor	mation to identify your	case:		
Debtor 1	Laurie Flinn Mille	r		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA	
Case number				
(if known)				Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the one of the control	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					<u> </u>
	Name				
	Number	Street			_
	Cit.		Ctata	ZID Code	_
2 2	City		State	ZIP Code	
2.3					_
	Name				
	Number	Street			_
	140111001	Circot			
	City		State	ZIP Code	_
2.4	- U.,		0.0.0	2 0000	
2.7	Name				_
	Ivallie				
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	-

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Fill in thi	s informa	ition to identify your	case:			
Debtor 1		Laurie Flinn Mille	r			
Debtor 2		First Name	Middle Name	Last Name		
(Spouse if, f	iling)	First Name	Middle Name	Last Name		
United St	ates Bank	ruptcy Court for the:	NORTHERN DISTRICT	Γ OF GEORGIA		
Case nur	mber					☐ Check if this is an amended filing
		m 106H H: Your Cod	ebtors			12/15
people ar fill it out, your nam	e filing to and numl e and cas	gether, both are equ ber the entries in the se number (if known)	ally responsible for sup	plying correct informat h the Additional Page t n.	ion. If more space is r o this page. On the to	ate as possible. If two married needed, copy the Additional Page, p of any Additional Pages, write
		, (u.	,			
■ No						
			ו lived in a community p Nevada, New Mexico, Pu			ty states and territories include
=						
	o. Go to lir es. Did voi		use, or legal equivalent liv	e with you at the time?		
in lin Form	e 2 again	as a codebtor only i schedule E/F (Official	f that person is a guarar	ntor or cosigner. Make	sure you have listed t	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
		1: Your codebtor ber, Street, City, State and Zl	IP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1	Name				☐ Schedule D, lir☐ Schedule E/F,☐ Schedule G, lir	line
	Number City	Street	State	ZIP Code	_	
3.2	Name				☐ Schedule D, lir☐ Schedule E/F,☐ Schedule G, lir	line
	Number City	Street	State	ZIP Code	_	

Official Form 106H Schedule H: Your Codebtors Page 1 of 1

							1					
Fill	in this information t	o identify your ca	ase:									
Del	otor 1	Laurie Flinn	Miller			_						
	otor 2 buse, if filing)					_						
Uni	ted States Bankrup	tcy Court for the	NORTHERN DISTRIC	T OF GEORGIA		_						
	se number						□ A		ed fil	showin	ng postpetitio	
0	fficial Form	106I					_	1M / DD/ \				
	chedule I:		ome				IV	וטט ז ווווו	111	ī		12/15
sup spo atta	plying correct infouse. If you are sep ch a separate she	ormation. If you parated and you	ible. If two married peo are married and not filin r spouse is not filing wi On the top of any addition	ng jointly, and your ith you, do not inclu	spouse i ude inforr	s liv nati	ing with on about	you, incl your sp	lude ous	inforr e. If m	mation abou ore space is	t your needed,
1.	Fill in your emplinformation.	oyment		Debtor 1				Debtor :	2 or	non-f	iling spouse	•
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed				☐ Employed					
		Employment status	☐ Not employed	☐ Not employed			☐ Not e	empl	oyed			
	employers.		Occupation	Registry Techn	ician							
	Include part-time, self-employed wo		Employer's name	Savista								
	Occupation may i or homemaker, if		Employer's address	200 North Poin Ste 299 Alpharetta, GA		E						
			How long employed ti	here? 4 yr 8n	no							
Par	t 2: Give De	tails About Mon						_				
Esti		ome as of the da	ate you file this form. If	you have nothing to ı	report for a	any	line, write	e \$0 in the	spa	ace. In	clude your no	on-filing
	u or your non-filing e space, attach a se		ore than one employer, co	ombine the information	on for all e	mpl	oyers for	that perso	on o	n the li	ines below. It	f you need
							For Del	otor 1			btor 2 or ing spouse	
2.			ry, and commissions (becalculate what the monthl		2.	\$	3	,124.94	\$	S	N/A	—
3.	Estimate and lis	t monthly overti	me pay.		3.	+\$		0.00	+	\$	N/A	<u>-</u>
4.	Calculate gross	Income. Add lin	e 2 + line 3.		4.	\$	3,12	24.94		\$	N/A	

Official Form 106I Schedule I: Your Income page 1

5. List all payroll ded 5a. Tax, Medicar 5b. Mandatory co 5c. Voluntary co 5d. Required rep 5e. Insurance	uctions: e, and Social Security deductions ontributions for retirement plans ntributions for retirement plans ayments of retirement fund loans pport obligations	4. 5a. 5b. 5c. 5d.	\$ \$	3,124.94 422.95		ebtor 2 or illing spouse N/A	_
5. List all payroll ded 5a. Tax, Medicar 5b. Mandatory co 5c. Voluntary co 5d. Required rep 5e. Insurance	uctions: e, and Social Security deductions ontributions for retirement plans ntributions for retirement plans ayments of retirement fund loans	5a. 5b. 5c.	\$		\$		-
5a. Tax, Medicar 5b. Mandatory co 5c. Voluntary co 5d. Required rep 5e. Insurance	e, and Social Security deductions ontributions for retirement plans ntributions for retirement plans ayments of retirement fund loans	5b. 5c.	· · —	422.0E	¢.		
5a. Tax, Medicar 5b. Mandatory co 5c. Voluntary co 5d. Required rep 5e. Insurance	e, and Social Security deductions ontributions for retirement plans ntributions for retirement plans ayments of retirement fund loans	5b. 5c.	· · —	422.05	¢		
5b. Mandatory co 5c. Voluntary co 5d. Required rep 5e. Insurance	ontributions for retirement plans ntributions for retirement plans ayments of retirement fund loans	5b. 5c.	· · —		an a	N/A	
5d. Required rep 5e. Insurance	ayments of retirement fund loans		\$	0.00	\$	N/A	_
5e. Insurance		5d.	\$	93.75	\$	N/A	_
	pport obligations		\$	0.00	\$	N/A	_
	pport ob l igations	5e.	\$	548.47	\$	N/A	_
· · · · · · · · · · · · · · · · · · ·		5f.	\$	0.00	\$	N/A	_
5g. Union dues 5h. Other deduct	tions. Specify:	5g. 5h.+	\$ - \$	0.00	, \$	N/A N/A	_
		—	· —				_
	ductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,065.17	\$	N/A	-
7. Calculate total mor	nthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,059.77	\$	N/A	-
8a. Net income f profession, c Attach a state	ne regularly received: rom rental property and from operating a business, or farm ment for each property and business showing gross hary and necessary business expenses, and the total						
monthly net in		8a.	\$	0.00	\$	N/A	
8b. Interest and		8b.	\$	0.00	\$	N/A	-
regularly rec Include alimo settlement, ar	ny, spousal support, child support, maintenance, divorce and property settlement.	8c.	\$	0.00	\$	N/A	
	ent compensation	8d.	\$	0.00	\$	N/A	_
8e. Social Secur		8e.	\$	0.00	\$	N/A	-
Include cash a that you recei	ment assistance that you regularly receive assistance and the value (if known) of any non-cash assistance, such as food stamps (benefits under the Supplemental stance Program) or housing subsidies.	e 8f.	\$	0.00	\$	N/A	
8g. Pension or re	etirement income	8g.	\$	0.00	\$	N/A	-
8h. Other month	ly income. Specify:	8h.+	+ \$	0.00	+ \$	N/A	-
9. Add all other incon	ne. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	<u>\</u>
•	income. Add line 7 + line 9.	10. \$	2	,059.77 + \$		N/A = \$	2,059.77
Add the entries in lir	e 10 for Debtor 1 and Debtor 2 or non-filing spouse.						
Include contributions other friends or related	lar contributions to the expenses that you list in Schedul from an unmarried partner, members of your household, you ives. mounts already included in lines 2-10 or amounts that are no	ır deper	,	,	•	hedule J. 11. + \$	0.00
	the last column of line 10 to the amount in line 11. The renth the Summary of Schedules and Statistical Summary of Certa					12. \$	2,059.77
						Combii monthi	ned y income
13. Do you expect an i ■ No. □ Yes. Explain	ncrease or decrease within the year after you file this form	n?				mondi	,

Official Form 106I Schedule I: Your Income page 2

Fill	in this informa	tion to identify yo	our case:					
Deb	tor 1	Laurie Flinn	Miller			Che	eck if this is:	
Deb	tor 2						An amended filing A supplement sho	wing postpetition chapter
(Spo	ouse, if filing)							f the following date:
Unit	ed States Bankr	uptcy Court for the	: NORTH	IERN DISTRICT OF GEO	RGIA		MM / DD / YYYY	
1	e number nown)							
Of	fficial Fo	rm 106J						
So	chedule	J: Your	Exper	ises				12/15
info	rmation. If m		eded, atta	If two married people a ch another sheet to this n.				
Par		ibe Your House	ehold					
1.	Is this a join No. Go to							
			in a separa	ate household?				
	□ No		st file Offici	al Form 106J-2, <i>Expense</i> .	s for Separate House	ehold of Del	btor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.						☐ Yes ☐ No
								□Yes
								□ No
								☐ Yes ☐ No
								☐ Yes
3.	expenses of	enses include f people other t d your depende	han 👝	No Yes				. –
Par		ate Your Ongoi						
exp				uptcy filing date unless y y is filed. If this is a sup				apter 13 case to report of the form and fill in the
the		n assistance an		government assistance luded it on <i>Schedule I:</i>			Your exp	nenses
(011	iiciai Foiiii 10	·01.)					. от охр	
4.		or home owners and any rent for th		ses for your residence. r lot.	Include first mortgage	e 4.	\$	1,275.00
	If not includ	led in line 4:						
		estate taxes				4a.	·	0.00
	•	rty, homeowner's				4b.	:	0.00
		maintenance, re owner's associat		ipkeep expenses		4c. 4d.	:	0.00 0.00
5.				our residence, such as ho	ome equity loans	4u. 5.	·	0.00

1 Laurie F	linn Miller	Case num	ber (if known)	
ilities:				
	heat, natural gas	6a.	\$	150.77
				0.00
				155.00
	•		·	0.00
•	<u> </u>		·	297.00
			·	0.00
			·	25,00
•	•		· ·	25.00
•			·	25.00
	•	11,	Ψ	25.00
•	5 , ,	12.	\$	50.00
			·	0.00
			·	0.00
	mations and religious defiations		Ψ	0.00
	surance deducted from your pay or included in lines 4 or 20.			
	· · · · · · · · · · · · · · · · · · ·	15a.	\$	0.00
			·	0.00
ic. Vehicle in	surance		·	55.00
			· -	0.00
	· · · · · ·		<u> </u>	0.00
		16.	\$	2.00
			· -	
		17a.	\$	0.00
b Car payme	ents for Vehicle 2	17b.	\$	0.00
c Other Spe	ecify:	17c.	\$	0.00
•	· ·	17d.	\$	0.00
•	·	as	·	
ducted from	your pay on line 5, Schedule I, Your Income (Official Form 106	I). 18.	\$	0.00
her payments	you make to support others who do not live with you.		\$	0.00
ecify:		19.		
		chedule I: Yo	ur Income.	
a. Mortgages	s on other property		· ·	0.00
b. Real estat	e taxes	20b.		0.00
c. Property, I	nomeowner's, or renter's insurance	20c.	\$	0.00
d. Maintenar	ice, repair, and upkeep expenses	20d.	\$	0.00
e. Homeown	er's association or condominium dues	20e.	\$	0.00
ther: Specify:		21.	+\$	0.00
•				0 0-0
	3	0		2,059.77
D. Copy line 2	z (montnly expenses for Debtor 2), if any, from Official Form 106J-2	2	\$	
c. Add line 22	a and 22b. The result is your monthly expenses.		\$	2,059.77
alculate vour	monthly net income.			
-		23a	\$	2,059.77
				2,059.77
Copy your	monthly expenses nom inc 220 above.	۷۵۵.		2,003.77
c. Subtract v	our monthly expenses from your monthly income.			
	is your monthly net income.	23c.	\$	0.00
The result you expect a r example, do you	an increase or decrease in your expenses within the year after ou expect to finish paying for your car loan within the year or do you expect y terms of your mortgage?			or decrease because
The result you expect a r example, do you	ou expect to finish paying for your car loan within the year or do you expect y			or decrease because (
	Water, sev. Telephone Other. Spe od and house hildcare and cothing, laund ersonal care pe dical and det ontertainment, haritable cont surance. Onot include in a. Life insura b. Health insura b. Health insura b. Health insura b. Health insura c. Vehicle insura c. Vehicle insura b. Gother insura c. Other insura c. Other insura b. Car payment b. Car payment c. Other. Spe d. Other. Spe ducted from y her payments ducted from y her payments ducted from y her payment succify: her real prop a. Mortgages b. Real estat c. Property, I d. Maintenan e. Homeown her: Specify: lculate your la a. Add lines 4 b. Copy line 22 c. Add line 22 slculate your la a. Copy line	Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: od and housekeeping supplies mildcare and children's education costs othing, laundry, and dry cleaning resonal care products and services edical and dental expenses ansportation. Include gas, maintenance, bus or train fare. o not include car payments. retrainment, clubs, recreation, newspapers, magazines, and books naritable contributions and religious donations surance. o not include insurance deducted from your pay or included in lines 4 or 20. a. Life insurance b. Health insurance c. Vehicle insurance, Specify: xes. Do not include taxes deducted from your pay or included in lines 4 or 20. recify: car tags stallment or lease payments: a. Car payments for Vehicle 1 b. Car payments for Vehicle 2 c. Other. Specify: d. Other. Specify: durp payments of alimony, maintenance, and support that you did not report ducted from your pay on line 5, Schedule I, Your Income (Official Form 106 her payments you make to support others who do not live with you. recify: her real property expenses not included in lines 4 or 5 of this form or on Sci. Mortgages on other property b. Real estate taxes c. Property, homeowner's, or renter's insurance d. Maintenance, repair, and upkeep expenses e. Homeowner's association or condominium dues her: Specify: cliculate your monthly expenses a. Add lines 4 through 21.	Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: 6c. Other. Specify: 6d. dand housekeeping supplies othidicare and children's education costs othing, laundry, and dry cleaning resonal care products and services othing, laundry, and dry cleaning resonal care products and services othing, laundry, and dry cleaning resonal care products and services othing, laundry, and dry cleaning resonal care products and services official and dental expenses ansportation. Include gas, maintenance, bus or train fare. In other include car payments. Itertainment, clubs, recreation, newspapers, magazines, and books aritiable contributions and religious donations surance. In othiculde insurance deducted from your pay or included in lines 4 or 20. a. Life insurance b. Health insurance b. Health insurance c. Vehicle insurance d. Other insurance. Specify: xes, Do not include taxes deducted from your pay or included in lines 4 or 20. recify: car tags stallment or lease payments: a. Car payments for Vehicle 1 b. Car payments for Vehicle 2 c. Other. Specify: dur payments of alimony, maintenance, and support that you did not report as ducted from your pay on line 5, Schedule 1, Your Income (Official Form 1061). Increase of the payments of alimony, maintenance, and support that you did not report as ducted from your pay on line 5, Schedule 1, Your Income (Official Form 1061). Increase of the property expenses not included in lines 4 or 5 of this form or on Schedule 1: Yea. Mortgages on other property Dear Real estate taxes C. Property, homeowner's, or renter's insurance d. Maintenance, repair, and upkeep expenses e. Homeowner's association or condominium dues her: Specify: do. Maintenance, repair, and upkeep expenses a. Add lines 4 through 21. b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 c. Add line 22a and 22b. The result is your monthly expenses. Illeulate your monthly texpenses for Debtor 2), if any, from	Electricity, heat, natural gas Water, sewer, garbage collection Chelphone, cell phone, Internet, satellite, and cable services Chelphone, cell phone, lothernet, satellite, and cable services Chelphone, lothernet, satellite, satellite, and cable services Chelphone, later and services Chelphone, later a

Fill in this inform	mation to identify your	case:		
Debtor 1	Laurie Flinn Mille	r		
	First Name	Middle Name	Last Name	_
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	_
United States Ba	ankruptcy Court for the:	NORTHERN DIS	TRICT OF GEORGIA	
Officed States Ba	inkrupicy Court for the.	NORTHERN DIS	TRICT OF GEORGIA	-
Case number _				
(if known)				☐ Check if this is an amended filing
	400			
Official Fo				
Statemer	nt of Intentio	n for Indiv	iduals Filing Under Cha	apter 7 12/15
-	ividual filing under cha		ll out this form if:	
	e claims secured by yo			
	sed personal property a		ot expired. you file your bankruptcy petition or by the d	late cat for the meeting of evalitors
			e time for cause. You must also send copies	
on the	form			
If two married pe	eople are filing together	r in a joint case, bo	oth are equally responsible for supplying cor	rect information. Both debtors must
sign ar	nd date the form.			
Be as complete a	and accurate as possib	le. If more space is	s needed, attach a separate sheet to this forn	n. On the top of any additional pages,
write y	our name and case nur	nber (if known).		
Part 1: List Yo	our Creditors Who Have	e Secured Claims		
•				
1. For any credit information be		art 1 of Schedule D	c Creditors Who Have Claims Secured by Pro	operty (Official Form 106D), fill in the
	editor and the property t	hat is collateral	What do you intend to do with the propert	
			secures a debt?	as exempt on Schedule C?
Creditor's			☐ Surrender the property.	□ No
name:			☐ Retain the property and redeem it.	_
Description of			Retain the property and enter into a	☐ Yes
property			Reaffirmation Agreement. Retain the property and [explain]:	
securing debt:			Tretain the property and [explain].	
-				
Creditor's			☐ Surrender the property.	□ No
name:			☐ Retain the property and redeem it.	
Description of			Retain the property and enter into a	☐ Yes
property			Reaffirmation Agreement. ☐ Retain the property and [explain]:	
securing debt:			Tretain the property and [explain].	
Creditor's			☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	
Description of			☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property			Reammation Agreement. Retain the property and [explain]:	
securing debt:			- Notain the property and [explain].	

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Debtor 1 Laurie Flinn Miller	Case number (i	Case number (if known)		
Creditor's	☐ Surrender the property.	□ No		
name:	Retain the property and redeem it.	□Yes		
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	□ Yes		
property	Retain the property and [explain]:			
securing debt:				
n the information below. Do not list real es	operty Leases that you listed in Schedule G: Executory Contracts and Un state leases. Unexpired leases are leases that are still in effe operty lease if the trustee does not assume it. 11 U.S.C. § 3	ect; the lease period has not yet ended.		
Describe your unexpired personal proper		Will the lease be assumed?		
accordo namo:				
Lessor's name: Description of leased		□ No		
Property:		☐ Yes		
Lessor's name:		□ No		
Description of leased Property:		☐ Yes		
_essor's name:		□ No		
Description of leased Property:		☐ Yes		
Lessor's name:		□ No		
Description of leased Property:		☐ Yes		
_essor's name:		□ No		
Description of leased Property:		☐ Yes		
_essor's name:		□ No		
Description of leased Property:		☐ Yes		
_essor's name:		□ No		
Description of leased Property:		☐ Yes		
Part 3: Sign Below				
Inder penalty of perjury, I declare that I ha roperty that is subject to an unexpired lea	ive indicated my intention about any property of my estate tase.	hat secures a debt and any personal		
,	inn Miller			
Laurie Flinn Miller Signature of Debtor 1	Signature of Debtor 2			

Date

May 18, 2022

Date

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Fill in this information to identify your case:						
Debtor 1	Laurie Flinn Mille	r				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA			
Case number						
(if known)					☐ Check if this is an amended filing	

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Par	1: Summarize Your Assets		
		Your as	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	7,518.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	7,518.00
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	1,327.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	29,310.21
	Your total liabilities	\$	30,637.21
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,059.77
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,059.77
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?		

- - No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 - Yes
- What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

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Debtor 1 Laurie Flinn Miller

Case number (if known)

- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$ 3,124.94

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clai	m
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	1,327.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	1,327.00

Till in this info	mation to identify your				
	mation to identify your				
Debtor 1	Laurie Flinn Mille First Name	Middle Name	Last Name		
Debtor 2	THOCHAMO	Wilder Name	Edot Name		
Spouse if, filing)	First Name	Middle Name	Last Name		
Jnited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA		
Case number					
if known)					☐ Check if this is an amended filing
two married poronger in the following the following the following mone in the following	eople are filing together	າ connection with a bank	nsible for supplying co	rrect information. s. Making a false statemen	t, concealing property, or imprisonment for up to 20
Sig	ın Below				
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out	bankruptcy forms?	
■ No					
☐ Yes.	Name of person				cy Petition Preparer's Notice, Signature (Official Form 119)
	re true and correct.	that I have read the sum	mary and schedules file	ed with this declaration an	d
X /s/ Lau	urie Flinn Miller	ie i widi i weer	X		
Laurie	Flinn Miller ure of Debtor 1		Signature o	f Debtor 2	
Date	May 18 2022		Date		

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Georgia

In r	e Laurie Flinn Miller		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPE	ENSATION OF ATTOR	NEY FOR DE	BTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the file be rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy, o	r agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	1,367.00
	Prior to the filing of this statement I have received		\$	27.00
	Balance Due			1,340.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed com	pensation with any other person un	nless they are mem	pers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the na			
5.	In return for the above-disclosed fee, I have agreed to	render legal service for all aspects	of the bankruptcy c	ase, including:
	 a. Analysis of the debtor's financial situation, and rend b. Preparation and filing of any petition, schedules, state. c. Representation of the debtor at the meeting of credit d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications 522(f)(2)(A) for avoidance of liens on her 	ntement of affairs and plan which notors and confirmation hearing, and reduce to market value; exenons as needed; preparation a	nay be required; any adjourned hea nption planning;	rings thereof;
6.	By agreement with the debtor(s), the above-disclosed for Representation of the debtors in any diany other adversary proceeding.			es, relief from stay actions or
		CERTIFICATION		
this	I certify that the foregoing is a complete statement of a bankruptcy proceeding.	ny agreement or arrangement for p	ayment to me for re	epresentation of the debtor(s) in
<u> </u>	May 18, 2022	/s/ Danielle J. Eliot		
_	Date	Danielle J. Eliot Signature of Attorney The Law Office of I 2470 Windy Hill Rd SUITE 151 Marietta, GA 30067 770-672-6735 Fax danielle@djelawfir Name of law firm	Danielle J. Eliot, l. : 404-891-3417	P.C.

United States Bankruptcy Court Northern District of Georgia

	N	forthern District of Ge	eorgia					
In re	Laurie Flinn Miller		Case N	0.				
		Debtor(s)	Chapte	7				
	VERIFICATION OF CREDITOR MATRIX							
The abo	ove-named Debtor hereby verifies that the atta	ached list of creditors is tr	rue and correct to the b	pest of his/her knowledge.				
Date:	May 18, 2022	/s/ Laurie Flinn Miller	Laurie Flinn Miller					
		Laurie Flinn Miller						

Signature of Debtor

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$78	administrative fee
+ \$15	trustee surcharge
\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
_	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
_	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

			_			
Fill in this	information to identify your case:				irected in this form and	l in Form
Debtor 1	Laurie Flinn Miller		122A-1S	ipb:		
Debtor 2 (Spouse, if fil	ing)		. 📗 🔳 1. Т	here is no presi	umption of abuse	
United Sta	ates Bankruptcy Court for the: Northern District of	of Georgia	· ;	applies will be m	o determine if a presur nade under <i>Chapter 7</i>	•
Case num	ber		.	· ·	cial Form 122A-2).	
(II KIIOWII)					does not apply now be service but it could ap	
O 661 1			☐ Ch	eck if this is a	n amended fi l ing	
	I Form 122A - 1		_			
Chapt	er 7 Statement of Your Cui	rrent Month	ly Incom	е		12/19
attach a sei case numbe	olete and accurate as possible. If two married people a parate sheet to this form. Include the line number to v er (if known). If you believe that you are exempted fro nilitary service, complete and file Statement of Exemp Calculate Your Current Monthly Income	which the additional in m a presumption of al	formation applies ouse because you	On the top of ar	ny additional pages, writ narily consumer debts o	te your name and or because of
1. Wha	t is your marital and filing status? Check one or	ıly.				
■ N	ot married. Fill out Column A, lines 2-11.					
□ м	arried and your spouse is filing with you. Fill o	ut both Columns A ar	nd B, l ines 2-11.			
□м	arried and your spouse is NOT filing with you.	You and your spou	se are:			
	Living in the same household and are not lega	ally separated. Fill o	ut both Columns	A and B, lines 2	2-11.	
	Living separately or are legally separated. Fill penalty of perjury that you and your spouse are I living apart for reasons that do not include evading	legally separated und	ler nonbankrupto	y law that applie	es or that you and your	
101(10A the 6 mc	e average monthly income that you received from all). For example, if you are filing on September 15, the 6-m onths, add the income for all 6 months and divide the total own the same rental property, put the income from that p	nonth period would be M I by 6. Fill in the result. [larch 1 through Aug Do not include any i	just 31. If the amo	ount of your monthly incon ore than once. For examp	ne varied during le, if both
			Colur Debt		Column B Debtor 2 or non-filing spouse	
	gross wages, salary, tips, bonuses, overtime, oll deductions).	and commissions (before all \$	3,124.94	\$	
3. Alim	ony and maintenance payments. Do not include mn B is filled in.	payments from a sp	ouse if \$	0.00	\$	
of you from and r	mounts from any source which are regularly poor or your dependents, including child support an unmarried partner, members of your household commates. Include regular contributions from a spin. Do not include payments you listed on line 3.	:. Include regular cont d, your dependents, p	tributions parents,	0.00	\$	
5. Neti	ncome from operating a business, profession,		_			
		Debtor 1				
	s receipts (before all deductions)	\$ <u>0.00</u> -\$ 0.00				
	nary and necessary operating expenses nonthly income from a business, profession, or far		oy here -> \$	0.00	\$	
	ncome from rental and other real property	Шф				
0. 116(1	noone nom romal and other real property	Debtor 1	I			
Gros	s receipts (before all deductions)	\$0.00_				
Ordir	nary and necessary operating expenses	-\$ 0.00				
Net r	monthly income from rental or other real property	\$0.00 Cor	oy here -> \$	0.00	\$	
7. Inter	est, dividends, and royalties		\$	0.00	\$	

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Debtor 1	Laurie Flinn Miller	Case number (if known)	

			Column A Debtor 1		Column B Debtor 2 or non-filing s	
8.	Unemployment compensation		\$	0.00	\$	
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:		r			
	For you \$ For your spouse \$	0.00				
9.	Pension or retirement income. Do not include any ambenefit under the Social Security Act. Also, except as sinot include any compensation, pension, pay, annuity, o United States Government in connection with a disabilit disability, or death of a member of the uniformed servic pay paid under chapter 61 of title 10, then include that places not exceed the amount of retired pay to which you if retired under any provision of title 10 other than chapter	tated in the next sentence, do or allowance paid by the ty, combat-related injury or ses. If you received any retired pay only to the extent that it u would otherwise be entitled		0.00	\$	
10.	Income from all other sources not listed above. Spi Do not include any benefits received under the Social Streceived as a victim of a war crime, a crime against hur domestic terrorism; or compensation pension, pay, and United States Government in connection with a disability disability, or death of a member of the uniformed servic sources on a separate page and put the total below.	Security Act; payments manity, or international or nuity, or allowance paid by the ty, combat-related injury or	•			
			\$	0.00	\$	
			\$	0.00	\$	
	Total amounts from separate pages, if any.	+	\$	0.00	\$	
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the to		3,124.94	+ \$		\$ 3,124.94 Total current monthly income
Part 12.	•					
	Calculate your current monthly income for the year	•				
	12a. Copy your total current monthly income for the year.	•	Сор	y line 11 h	ere=>	\$3,124.94_
		•	Сор	y line 11 h	ere=>	\$ 3,124.94 x 12
	12a. Copy your total current monthly income from line 1	11	Сор	y line 11 h	n ere=> 12b.	x 12
	12a. Copy your total current monthly income from line 1 Multiply by 12 (the number of months in a year)	e form	Сор	y line 11 h		x 12
	12a. Copy your total current monthly income from line 1Multiply by 12 (the number of months in a year)12b. The result is your annual income for this part of the	e form	Сор	y line 11 h		x 12
	12a. Copy your total current monthly income from line 1 Multiply by 12 (the number of months in a year) 12b. The result is your annual income for this part of the Calculate the median family income that applies to	e form you. Follow these steps:	Сор	y line 11 h		x 12
	12a. Copy your total current monthly income from line 1 Multiply by 12 (the number of months in a year) 12b. The result is your annual income for this part of the Calculate the median family income that applies to 1 Fill in the state in which you live.	e form you. Follow these steps: GA 1				x 12
13.	12a. Copy your total current monthly income from line 1 Multiply by 12 (the number of months in a year) 12b. The result is your annual income for this part of the Calculate the median family income that applies to Fill in the state in which you live. Fill in the number of people in your household.	e form you. Follow these steps: GA 1 of household. online using the link specified			12b. 13.	x 12 \$ 37,499.28
13.	12a. Copy your total current monthly income from line 1 Multiply by 12 (the number of months in a year) 12b. The result is your annual income for this part of the Calculate the median family income that applies to Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size To find a list of applicable median income amounts, go	e form you. Follow these steps: GA 1 of household. online using the link specified			12b. 13.	x 12 \$ 37,499.28
13.	12a. Copy your total current monthly income from line 1 Multiply by 12 (the number of months in a year) 12b. The result is your annual income for this part of the Calculate the median family income that applies to graph in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank	e form you. Follow these steps: GA 1 of household. online using the link specified ruptcy clerk's office. n the top of page 1, check bot Form 122A-2.	I in the separ	ate instruct	12b. 13. ions ption of abuse	x 12 \$ 37,499.28 \$ 55,600.00
13.	Multiply by 12 (the number of months in a year) 12b. The result is your annual income for this part of the Calculate the median family income that applies to y Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank How do the lines compare? 14a. Line 12b is less than or equal to line 13. O Go to Part 3. Do NOT fill out or file Official 14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A–2.	e form you. Follow these steps: GA 1 of household. online using the link specified ruptcy clerk's office. n the top of page 1, check bot Form 122A-2.	I in the separ	ate instruct	12b. 13. ions ption of abuse	x 12 \$ 37,499.28 \$ 55,600.00
13.	Multiply by 12 (the number of months in a year) 12b. The result is your annual income for this part of the Calculate the median family income that applies to y Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank How do the lines compare? 14a. Line 12b is less than or equal to line 13. O Go to Part 3. Do NOT fill out or file Official 14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A–2.	e form you. Follow these steps: GA 1 of household. online using the link specified ruptcy clerk's office. n the top of page 1, check box Form 122A-2. of page 1, check box 2, <i>The page</i>	in the separ x 1, <i>There is</i> resumption o	ate instruct no presum f abuse is d	12b. ions ption of abuse	x 12 \$ 37,499.28 \$ 55,600.00 9. Form 122A-2.
13.	Multiply by 12 (the number of months in a year) 12b. The result is your annual income for this part of the Calculate the median family income that applies to give the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank How do the lines compare? 14a. Line 12b is less than or equal to line 13. On Go to Part 3. Do NOT fill out or file Official Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A–2. 3: Sign Below	e form you. Follow these steps: GA 1 of household. online using the link specified ruptcy clerk's office. n the top of page 1, check box Form 122A-2. of page 1, check box 2, <i>The page</i>	in the separ x 1, <i>There is</i> resumption o	ate instruct no presum f abuse is d	12b. ions ption of abuse	x 12 \$ 37,499.28 \$ 55,600.00 9. Form 122A-2.

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Debtor 1	Laurie Flinn Miller	Case number (if known)	
Date May 18, 2022			
	MM / DD / YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this form	n.	

Advanced Home Medical Equip 2233 E Main St Montrose, CO 81401

Chase Card Services Attn: Bankruptcy P.O. 15298 Wilmington, DE 19850

Chase Card Services Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850

Chase Card Services Po Box 15369 Wilmington, DE 19850

FLEX FINANCE Attn: Bankruptcy 246 5th Avenue 4th Fl New York, NY 10001

FLEX FINANCE 246 5th Avenue New York, NY 10001

Frost Arnett Company P.O. Box 198988 Nashville, TN 37219

Georgia Department of Revenue 1800 Century Blvd Ste 9100 Atlanta, GA 30345

Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101

Kohls/Capital One Attn: Credit Administrator Po Box 3043 Milwaukee, WI 53201

Kohls/Capital One Po Box 3115 Milwaukee, WI 53201

Northland Group P.O. Box 390846 Minneapolis, MN 55439

Patients Account Bureau P.O. Box 379 Norcross, GA 30091

Piedmont PO Box 102859 Atlanta, GA 30368

Riverwoods Bahavioral Health 223 Medical Center Dr Riverdale, GA 30274

Synchrony Bank Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank Po Box 965028 Orlando, FL 32896

Synchrony Bank/JCPenney Attn: Bankruptcy Po Box 965060 Orlando, FL 32896 Synchrony Bank/JCPenney Po Box 965007 Orlando, FL 32896